

IN THE UNITED STATES DISTRICT COURT FOR THE **FILED**

WESTERN DISTRICT OF OKLAHOMA

MAY 03 2023

UNITED STATES OF AMERICA,)

Plaintiff,)

-vs-)

WILLIAM KERNER,)

Defendant.)

CARMELITA REEDER SHINN, CLERK
U.S. DIST. COURT, WESTERN DIST. OKLA.
BY kk, DEPUTY

CR 23-196 JD

No. _____

Violation: 18 U.S.C. § 1347

INDICTMENT

The Federal Grand Jury charges:

At all times relevant to this Indictment:

Introduction

1. The Medicaid Program ("Medicaid") was a cooperative federal and state program that provided federal and state funds to pay for health care benefits for certain income-eligible individuals. Medicaid was administered federally by the Centers for Medicare and Medicaid Services, a federal agency under the United States Department of Health and Human Services. In Oklahoma, Medicaid was administered by the Oklahoma Health Care Authority ("OHCA"), a state governmental agency located in Oklahoma City, Oklahoma. OHCA was responsible for reviewing and paying Medicaid claims submitted by approved health care providers.

2. Behavioral health counseling was a reimbursable health care benefit available to Medicaid beneficiaries.

3. To receive Medicaid reimbursement in Oklahoma, a health care provider had to enter into a Provider Agreement with OHCA and receive a provider number. Health care providers seeking Medicaid reimbursement submitted claims to OHCA that included the name and Medicaid provider number of the provider rendering the service, the name and Medicaid provider number of the provider's employer, the name and identification information of the Medicaid beneficiary to whom the service was provided, the date the service was provided, the type of service provided, and the length of service provided. Providers could submit claims for reimbursement electronically.

4. The reimbursement that health care providers received from OHCA was determined by Medicaid fee schedules based on the type and length of service. Payments to a provider were deposited electronically by the Oklahoma State Treasurer into the bank account of the provider's employer.

5. Quest MHSA, LLC ("Quest"), located in Antlers, Oklahoma, provided behavioral health counseling. Quest entered into a Provider Agreement with OHCA and was eligible for reimbursement from Medicaid.

6. **WILLIAM KERNER ("KERNER")** was a licensed behavioral health practitioner and independent contractor of Quest.

7. **KERNER** entered into a Provider Agreement with OHCA and was

eligible for reimbursement from Medicaid for providing behavioral health counseling services to Medicaid beneficiaries.

COUNTS 1-30
(Health Care Fraud)

8. The Federal Grand Jury re-alleges and incorporates by reference paragraphs 1 through 7 as though fully set forth herein.

Purpose of the Scheme and Artifice

9. The purpose of the scheme and artifice to defraud was for **KERNER** to unlawfully enrich himself by submitting false and fraudulent Medicaid claims to OHCA for behavioral health counseling services that he did not render and rendered only in part.

The Scheme and Artifice

10. It was part of the scheme and artifice to defraud that:

A. From January 2018 to June 2022, **KERNER** submitted and caused to be submitted, through Quest, approximately 3,252 false and fraudulent claims for reimbursement to OHCA for behavioral health counseling sessions that he purportedly provided to 31 Medicaid beneficiaries.

B. Relying on **KERNER's** fraudulent claims, OHCA reimbursed Quest approximately \$229,838 for behavioral health counseling services that **KERNER** never provided and provided only in part.

C. Pursuant to an independent contractor agreement, Quest paid

KERNER a percentage of the reimbursement paid to Quest for each fraudulent claim submitted and caused to be submitted by **KERNER** to OHCA.

Executions of the Scheme and Artifice

11. On or about the dates specified below as to each count, in the Western District of Oklahoma,

----- **WILLIAM KERNER** -----

knowingly and willfully executed and attempted to execute the above-described scheme and artifice to defraud Medicaid, a health care benefit program as defined in Title 18, United States Code, Section 24(b), and to obtain money from Medicaid by means of materially false and fraudulent pretenses, representations, and promises, all in connection with the delivery of and payment for health care benefits, items, and services. In particular, **KERNER**, through Quest, submitted and caused to be submitted the following false and fraudulent claims for reimbursement to Medicaid, for behavioral health counseling services that he never performed and performed only in part:

Count	Date Claim Submitted to Medicaid	Purported Medicaid Client	Purported Date of Service	Amount Paid by Medicaid
1	01/23/2018	D.W.	01/05/2018	\$68.72
2	04/10/2018	D.W.	03/23/2018	\$68.72
3	08/28/2018	D.W.	07/17/2018	\$70.80

4	12/18/2018	D.W.	11/27/2018	\$70.80
5	02/12/2019	D.G.	01/28/2019	\$70.80
6	02/26/2019	D.W.	02/07/2019	\$70.80
7	07/02/2019	D.G.	05/22/2019	\$70.80
8	08/13/2019	D.W.	08/07/2019	\$70.80
9	09/10/2019	D.G.	08/09/2019	\$70.80
10	10/30/2019	D.W.	10/18/2019	\$70.80
11	02/11/2020	D.G.	01/01/2020	\$70.80
12	04/14/2020	D.W.	04/13/2020	\$70.80
13	08/05/2020	D.G.	07/29/2020	\$70.80
14	10/13/2020	D.W.	10/12/2020	\$70.80
15	01/12/2021	D.G.	01/05/2021	\$70.80
16	03/31/2021	J.P.	03/30/2021	\$103.33
17	05/25/2021	D.W.	05/19/2021	\$70.80
18	06/08/2021	D.G.	03/30/2021	\$70.80
19	08/18/2021	J.P.	07/12/2021	\$70.80
20	09/15/2021	D.W.	09/13/2021	\$70.80
21	10/20/2021	J.P.	10/01/2021	\$70.80
22	12/14/2021	D.W.	12/09/2021	\$70.80
23	12/21/2021	J.P.	12/17/2021	\$70.80

24	12/21/2021	D.W.	12/15/2021	\$70.80
25	02/22/2022	D.W.	02/16/2022	\$70.80
26	03/09/2022	J.P.	03/03/2022	\$70.80
27	03/09/2022	D.W.	02/23/2022	\$70.80
28	04/05/2022	J.P.	03/29/2022	\$70.80
29	05/18/2022	D.W.	05/06/2022	\$70.80
30	06/14/2022	J.P.	06/07/2022	\$70.80

All in violation of Title 18, United States Code, Section 1347.

A TRUE BILL:



FOREPERSON OF THE GRAND JURY

ROBERT J. TROESTER
United States Attorney



D.H. DILBECK
Assistant United States Attorney

CANDACE ARNOLD
Special Assistant United States Attorney

Court

CRIMINAL COVERSHEET

JD

U.S. District Court, Western District of Oklahoma

CR 23-196

Petty ☐ Misdemeanor ☐ Felony ☒ USAO No.: _____ Case No.: _____Charging Document: Indictment No. of Defendants: 1 Total No. of Counts: 30 Sealed: Y ☒Forfeiture: Y ☐ OCDEF: Y ☐ McGirt: Y ☐ Warrant ☒ Summons ☐ Notice ☐ N ☐
N ☒ N ☒ N ☒ Companion Case No. (if any): _____

DEFENDANT INFORMATION:

By: mh

Name: William Kerner		MAY 02 2023	
Alias(es):		Address:	
		FBI No.:	
DOB: 1970	SSN: 5359	Race: White	Interpreter: Y <input type="checkbox"/> N <input checked="" type="checkbox"/>
Sex: M <input checked="" type="checkbox"/> F <input type="checkbox"/>	Juvenile: Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Language/Dialect: English	

DEFENDANT STATUS/RECOMMENDATION:

PRIOR MAGISTRATE

JUDGE PROCEEDINGS:

<input checked="" type="checkbox"/> Not in Custody	<input type="checkbox"/> Detention Requested	Complaint: Y <input type="checkbox"/> N <input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Type of Bond: <u>OR</u>		Magistrate Judge Case No.: MJ-
<input type="checkbox"/> In Custody at: _____		Previously Detained: Y <input type="checkbox"/> N <input checked="" type="checkbox"/>
Inmate/Prisoner/Register No.: _____		

ATTORNEY/AGENCY INFORMATION:

<input type="checkbox"/> Public Defender	Name: _____	AUSA: <u>D.H. Dilbeck</u>
<input type="checkbox"/> CJA Panel	Address: _____	Agent /Agency: <u>OAG</u>
<input type="checkbox"/> Retained	Phone: _____	Local Officer/Agency: _____

CHARGING DETAILS

<u>Count(s)</u>	<u>U.S.C. Citation(s)</u>	<u>Offense(s) Charged</u>	<u>Penalty</u>
1-30	18 U.S.C. § 1347	Health Care Fraud	NMT 10 years' imprisonment, \$250,000 fine, o/b; NMT 3 years' supervised release; \$100 special assessment.

RECEIVED

MAY 03 2023

Clerk, U.S. District Court
WEST.DIST.OF OKLA.Signature of AUSA: s/D.H. DilbeckDate: 05/02/2023